

No. **C 78207****Due no later than Mar 31, 2002
Annual Report Form**2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

ARCHIBALD INSURANCE CENTER, INC.
LYNN ARCHIBALD
135 WEST MAIN, BOX 96LYNN D. ARCHIBALD
135 W. MAIN, BOX 96

REXBURG, ID 83440

**NO FILING FEE IF
RECEIVED BY DUE DATE**

REXBURG, ID 83440

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRES.	LYNN D. ARCHIBALD,	P.O. Box 96	REXBURG	ID	83440
SEC.	PATRICIA ARCHIBALD,	P.O. Box 96	REXBURG	ID	83440

5. Organized Under the Laws of:

IDAHO

6.

Signature

Lynn D. Archibald

Date

1-11-02

LYNN D. ARCHIBALD,

PRESIDENT